

Overview of the San Mateo Long Term Care Integration Plan

San Mateo has identified three stages to achieve their designed integration plan (LTSSP) by 12/2008. Within each stage, phases have been identified which are achievable components of the integration project. Long term care integration (per AB 1040) will be accomplished by Phase 1c. The development grant period (July 1, 2001 through June 30, 2002) covers Phase 1a which is detailed below.

Stage 1: Integrate all Medi-Cal funds and services	<ul style="list-style-type: none"> • Phase 1a: Integrate primary care (acute care, ancillary care, medications), ADHC and SNF Medi-Cal funding and services; • Phase 1b: IHSS integrated; • Phase 1c: HCB [MSSP, AIDS Waiver, any other Medi-Cal waivers for adults (e.g. HCB waivers and nursing home waivers)] Medi-Cal funds integrated 	6/2000 1/2001 7/2004
	All Medi-Cal funds, including HCB, medical, and long-term institutional care (skilled nursing facility funds) would be integrated and/or closely linked. The initial target population would be 18 and above, with two or more deficits in activities of daily living, and Medi-Cal eligible. Non-Medi-Cal clients would continue to be served through separate funding streams.	
Phase 1a – Development Grant: Integrate primary care, ADHC, and SNF Medi-Cal funding and services	<ul style="list-style-type: none"> • Target population: mandatory enrollment of the frail aged, blind and disabled (ABD), and Medi-Cal and skilled nursing facility (SNF) eligible adults aged 18 and over. Participation of the dual eligible Medi-Cal Medicare population will be voluntary during this stage. • Operating agency: Initially, Aging & Adult Services, until HCFA waiver(s) are obtained for ADHC and SNF, then the Health Plan of San Mateo (HPSM) will administer the project • Governance: HPSM Commission • Scope of services: existing SNF, ADHC, primary, acute ancillary, pharmacy; new assessment and care management; new and existing HCB services supported by integrated funds (e.g. respite, nutrition); AAS TIES line (24-hour emergency information and referral) 	

Overview of San Mateo LTCI plan – *Continued*

Steps included in Phase 1a (some start in Phase 1a and are completed by the end of Phase 1c):	<ul style="list-style-type: none"> • Secure SNF and ADHC waivers (modification of HPSM waiver) (completion by 6/2001) • Negotiate capitated rates with State (completion by 12/2002) • Establish governance structure (completion by 12/2002) • Develop broad and flexible benefits (completion by 12/2003) • Create eligibility screening tool (completion by 8/2002) • Research and develop method to automate consumer and provider data (completion by 6/2004) • Design a single system of care for beneficiaries that includes uniform assessments, authorization and care management (completion by 8/2002) • Develop quality system (completion by 6/2004) • Create implementation time-table for start-up plan (completion by 7/2004) 	
Stage 2: Integrate Medicare, Older Americans Act (title II/VII), Federal rehabilitation, transportation funds and services	<ul style="list-style-type: none"> • Phase 2a: Creation of Medicare HMO • Phase 2b: Older Americans Act funded programs integrated • Phase 2c: Federal rehabilitation and transportation funds integrated 	7/2006 1/2007 7/2007
	<p>Adds Medicare, Older America act (Title III/VII), Federal Rehabilitation, and transportation funds and services into the LTSSP. At this stage, the target population will broaden to include aged and disabled adults at risk of or experiencing limitation in the ADLs and IADLs. Dual eligible consumers will be served through one service system, reducing problems associated with prescriptions and treatments that could originate through Medi-Cal and Medicare. LTSSP will be able to serve both Medi-Cal and non Medi-Cal consumers and systems will be in place to track and account for separate funding sources that can serve these two populations.</p>	

Overview of San Mateo LTCI plan – *Continued*

Stage 3: Integrate Regional Center/disability funds	• Phase 3a: Establish MOU to coordinate care between Regional Centers and LTSSP	1/2008
	• Phase 3b: Explore feasibility of integrating Regional Center funds and services	7/2008
	• Phase 3c: Integrate Regional Center funds and services	12/2008
	Would integrate disability funding and fees (the developmentally disabled and mentally retarded populations), regional centers and rehabilitation services. Achieving this level of integration will involve assessing feasibility. In the interim, LTSSP will establish MOU's with regional centers to enable closer coordination of services through the LTSSP care management function.	
